

RML Directors Meeting at MLA

by Alison Bunting

ARIZONA

CALIFORNIA

HAWAII

NEVADA

PACIFIC
BASIN

The annual RML Directors meeting, held in conjunction with the Medical Library Association annual meeting in Seattle, began with two very welcome and important announcements concerning NLM programs and services. Lois Ann Colaianne, Deputy Director for Library Operations, informed the RML directors and staff that the NLM Board of Regents has approved a recommendation to begin offering World Wide Web access to NLM databases free of charge. This proposed change is possible since NLM no longer incurs communications, billing, or computing costs when it provides access to its databases via the Internet. A formal press announcement about this change will be made in June, 1997; the first databases to be affected are those currently accessible via Internet Grateful Med (IGM) or PubMed. Complete implementation is expected to take about a year, since not all of the current Elhill searching features can be immediately transferred and many logistical details must be addressed.

NLM has also decided to expand the list of journals indexed for MEDLINE to include some consumer health titles. A preliminary list of journal titles is under development at NLM now. In the near future NLM will consult with

selected librarians and other consumer health experts to rank the titles. As more information about these two new services becomes available, PSRML will inform Region 7 librarians via *Latitudes*, our Web pages, and our listserve.

As part of its efforts to improve customer service, NLM has installed a new phone service (see page 7) and upgraded its Web site. NLM has also caught up with the indexing backlog which developed in 1996, but is still reviewing for accuracy citations indexed and input by "volunteers" during the indexing crisis.

Maureen Czujak of the NN/LM National Online Training Center (NOTC) reported that online training classes have been shortened to two days as a result of implementation of a new curriculum which utilizes two videotapes, and seven computer based tutorials. A brand new workbook, complete with table of contents and index has also been introduced. The Web pages for the NOTC (<http://www.nnlm.nlm.nih.gov/mar/online/>) provide complete information on class descriptions and dates, an online registration form, and ordering information for the NLM Online Services Reference Manual and 1997 MeSH tools.

PSRML and the Midcontinental RML

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Latitudes

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(RML Directors Meeting, continued from page1)

provided updates on their respective distance education project plans. PSRML is collaborating with the California Department of Health services, eleven county health departments in Northern California, the Lawrence Livermore National Laboratory, Pacific Bell, and VTEL to provide distance education opportunities for public health personnel. PSRML will teach several of its Internet classes using the distance education PicTel equipment in the UCLA School of Public Health. The Midcontinental Region will focus on providing basic library skills training via an audioconference and an interactive study guide; providing DOCLINE training for network members via the Web; and using NetMeeting, a video application sharing software, with small hospitals in their region.

The New England RML demonstrated a new DOCLINE CD-ROM training program which will become available to all regions in the near future. They also plan to make the program available via the Web. The Pacific Northwest RML reported on their work with NLM staff members, Elliot Siegel and Fred Wood, to identify different models for outreach programs, test and evaluate the models identified, and publish the results of their analysis.

Each region was asked to select three issues or topics that are of most concern to network libraries in their region. PSRML reported that Region

7 libraries are concerned with the economics of health care, most especially rightsizing, mergers, and a "bottom line" attitude of administrators. Librarians are also very interested in making optimum use of the Internet, and developing support for consumer health information services in response to JCAHO expectations. Many of the other regions noted similar concerns and added topics such as managing the transition from print to electronic resources; electronic fund transfer for interlibrary loan; and online SERHOLD and OCLC data conversion.

The RML directors requested that the NN/LM Web team, which includes a representative from each region and the National Network Office, meet and make recommendations for changes to the format and content of the NN/LM Web page, now that each region has gained additional experience and perspective in the development of Web resources. There was general agreement that it would be useful to cooperatively develop and use pages which contain information common to all regions.

The meeting concluded with a presentation by Martha Fishel, Deputy Chief of NLM's Public Services Division on the reinvention of interlibrary loan processing at NLM, made possible by the implementation of the Relais document delivery processing system, produced by Network Support Inc. For a more complete description of these changes see the article by Cassandra R. Allen in the May/June 1997 issue of *Latitudes*. ☛

NCNMLG Digirati Take MLA '97 Award!

by Heidi Sandstrom

The Northern California and Nevada Medical Library Group was the one regional chapter of the Association that was honored for its excellence in health sciences librarianship at the Awards Ceremony at MLA '97—the 97th Annual Meeting of the Medical Library Association held in May in Seattle. NCNMLG received the Majors/MLA Chapter Project of the Year Award for its World Wide Web site on the Internet, NCNWeb. Take a moment to visit (www-ncnmlg.stanford.edu:5000) and send a congratulatory comment for this special project that is "above and beyond"!

The Online SERHOLD Updating System: Where We've Been...Where We're Going

by Heidi Sandstrom

Last November (*Latitudes*, v5, n6) I issued a challenge to all library managers in our Region participating in SERHOLD to update their libraries' holdings records by the end of 1996, knowing that this challenge might be difficult to meet, but would at the least serve as a call to action. This deadline was proposed in anticipation of NLM's next quarterly deadline, February 1, for producing an **annual** regional SERHOLD tape. By year's end, it became apparent, in consultation with Area SERHOLD Coordinators and representatives from the Medical Library Groups, that this deadline was not realistic. A new deadline of May 1 was proposed and publicized at the MLG Joint Meeting and in *Latitudes* (v6, n2). Subsequent to this announcement, NLM issued its *1997 SERHOLD Update Guide*, which stated that SERHOLD tape requests "may be submitted at any time throughout the year." Since the deadline had already been proposed and publicized in our Region, it remained in effect.

However, as we approached May 1, "Murphy's Law" took effect and many users in our Region experienced problems with online updating. The Technical Services

Division of NLM, aware of the dilemma we were facing, was very responsive in implementing changes to resolve these problems, but they could not be fully resolved by the deadline of May 1. Therefore, the deadline was extended to May 31, 1997.

I am hopeful that this process can proceed more smoothly in the future, in consideration of the following:

1. The Online SERHOLD Updating System allows library managers to keep their holdings records up to date at all times, and then to rely on DOCLINE to route based on that information. However, since we must still rely on an annual SERHOLD tape in order to produce union list products, it seems advisable to set an annual deadline for updating that remains the same from year to year, for those individuals and groups who would still like print products.

2. The VA libraries in our Region must update their holdings at least once a year on June 1. It makes sense to have a Regional deadline that coincides with this date.

3. The Union List Contacts and

ILL Committees of the Medical Library Groups, the Area SERHOLD Coordinators, along with those responsible for updating SERHOLD records at the Resource Libraries, and librarian members of the RAC can provide invaluable advice on improving this process in the future, to ensure that ALL participating libraries have updated records.

Those procedures which are adopted in the future will be communicated to all in a clear and timely manner. As always, I welcome your comments and suggestions.

As we go to press, we have submitted an ANNUAL SERHOLD UNION LIST PRODUCT REQUEST FORM to NLM for our entire Region. This Regional tape will be sent to the Pacific Northwest Regional Medical Library (PNRML) and mounted on its server in order to allow individual libraries to ftp a list of their holdings. Union list subset products can then be requested through PSRML to be run from this tape. When the tape has been mounted at PNRML, notification will be sent to Network libraries in our Region. ★

NN/LM Document Delivery Service Information

Information about those National Network of Libraries of Medicine programs which facilitate document delivery can now be found on one Web site on the Internet. These programs include DOCLINE (NLM's automated interlibrary loan

request and referral system), SERHOLD (a serials holdings database), and Loansome Doc (the document ordering feature of Grateful Med). In addition, this site includes links to the QuickDOC File Archive, and to NLM resources such as

manuals for *DOCLINE* and *Online SERHOLD Procedures* and various Fact Sheets. For one-stop shopping, drop by this URL:
<http://www.nnlm.nlm.nih.gov/nnlm/docdel> ★

Highlights from NLM's Online Lunch & Learn

By Claire Hamasu

Sheldon Kotzin, Chief of Bibliographic Services, opened this year's lunch & learn by characterizing the past year as the year NLM recovered from the "year from hell". Remember the federal furloughs and the snow storms and the contractor suit? To balance the previous year, there were positive outcomes resulting from the problems. The PREMEDLINE database got its start to provide access to citations during the period when there was a major indexing backlog. That backlog has now been eliminated and MEDLINE is up-to-date. At NLM's request, an increasing number of publishers are supplying electronic citations speeding up their entry into MEDLINE.

Stuart Nelson, the new Head of the Medical Subject Headings Section was introduced. He is reviewing the front matter of the Annotated MeSH and would welcome comments. Mr. Kotzin then proceeded to describe what the NLM staff had accomplished this past year and anticipated in the coming year.

Databases

PREMEDLINE, a new database, is updated daily. The 25,000 - 100,000 citations in this database are unvalidated

as they await indexing and incorporation into MEDLINE. OLDMEDLINE, another new database, holds citations from 1962-1965 and is indexed under MeSH from that time period. NLM may map to current terms in the future. DentalProj has been deleted at the request of the National Institute of Dental Research. The DentalProj information is still available from CRISP (Computer Retrieval of Information on Scientific Projects) which is accessible from the NIH homepage (<http://www.nih.gov>).

MEDLARS Search Interfaces

Windows Grateful Med had its debut offering access to MEDLINE. AIDSLINE and PREMEDLINE will be added to its searchable databases by early 1998.

Internet Grateful Med offers MEDLINE, PREMEDLINE, and HEALTHSTAR and will next be adding AIDSDRUGS, AIDSTRIALS, DIRLINE, HISTLINE, OLDMEDLINE, SDILINE and HSRProj. PubMed, another Web interface, is undergoing redesign and currently gives free access to the MEDLINE and PREMEDLINE databases. (<http://ncbi.nlm.nih.gov/PubMed>)

InterLibrary Loan

Only 31% of DOCLINE users are exclusively transmitting over the Internet. One of the problems restricting Internet usage has been with printing. NLM has tested telnet clients and found three that will allow one step printing without having to do screen captures and reformatting in a word processing program. They are NetTerm, Anzio Win, and SmarTerm 420. More information on these programs are available on the NLM home page (<http://www.nlm.nih.gov>).

To reduce NLM's document delivery time, an automated ILL system, Relais, is being installed and will be fully operational by September 1997. Relais allows better tracking of requests, replaces photocopiers with scanners, and allows the electronic delivery of documents.

Trivia

Despite the advent of electronic journals, everyone attending the Lunch & Learn voted that DOCLINE would still be viable five years into the future.

Fixed Fee and Flat Rate Program users represent 35% of all domestic searchers.

70% of the MEDLARS searches are coming over the Internet. ★

California Teleconnect Fund

The California Public Utilities Commission has made \$4 million available to encourage the use of technology in California libraries and schools. These funds allow qualified institutions to apply for a 50% discount off the rate charged by their Internet service provider. The discount will last as long as there are funds available.

If you are a California library sharing your resources with other California libraries you are a qualified applicant. PSRML especially encourages member libraries who are not Internet connected to apply for this funding. PSRML can provide assistance with selecting an ISP. Contact PSRML for instructions and the forms necessary to apply for a discount. ★

Library Networking in California: An Update

by Heidi Sandstrom

In the March/April 1997 issue of *Latitudes* (v6,n2), Barbara Will, Network Coordinator at the California State Library, provided background information on "The Library of California", a proposed multitype library network that would link and serve the 8,000 California libraries of all types—academic, public, school, and special—through resource sharing. SB409 (The Library of California) was heard for the first time on April 16, 1997, by the Senate Education Committee (the policy making body), where it passed unanimously. The Senate Appropriations Committee subsequently placed the bill in the suspense file. It will not get into the budget unless the governor pulls it out and makes it part of his own legislative agenda. Your letters to Governor Wilson are critical now if you want to support the implementation of SB409.

If enacted, SB409 would:

- expand the current public library resource-sharing statute to encompass all types of libraries, providing reimbursements to libraries that share materials or information with Californians who do not constitute their primary clientele

- establish a telecommunications infrastructure, building upon what is already in place, to create and share information resources electronically
- provide a back-up for every library of every type, to respond to the informational and resource requests from patrons that are beyond the library's mission and/or capacity
- create a forum for cooperative initiatives

The detailed Library of California plan, which is the basis for SB409 and its subsequent regulations and implementation strategies, is available from the California State Library (Attention: Barbara Will), PO Box 942837, Sacramento, CA 94237-0001. Barbara can also be reached by phone at (916) 653-7071 or by fax at (916) 653-8443.

You can reach Governor Pete Wilson at:

Governor Pete Wilson
1st Floor, State Capitol
Sacramento, CA 95814

Phone: (916) 445-2841
Fax: (916) 445-4633

Now is the time to make your opinions count! ★

Hesitation about Accreditation?

by Heidi Sandstrom

For those of you who are expecting "visitors" sometime in the near future...this new DocKit was highlighted at MLA!

DocKit #10: Accreditation and the Hospital Library: Information Management Plans and Assessment Tools

The description on the MLA DocKits website states, in part, "DocKit #10 provides examples of information management (IM) plans, institutional responses to IM plans, and assessment tools." For more information, you may want to visit this URL:

<http://www.kumc.edu/MLA/dockits.html>

As health sciences information specialists, medical librarians are uniquely qualified to facilitate many aspects of the survey process and to assume expanded roles within their institutions. DocKit #10 gives you the right tools for the job.

Be prepared for those out-of-town guests... ★

An Analysis of Unfilled DOCLINE Lending Requests

At the Annual Joint Meeting of MLGSCA and NCNMLG this past January, Barbara Slater, Reference Librarian and Coordinator of Document Delivery/ILL at the Biomedical Library of UC San Diego, presented an excellent paper on improving ILL efficiency. As I listened to it, I kept thinking, "I wish the entire Region could be in this room..." Barbara took the idea one step further and submitted a manuscript to the editors of the MLA Bulletin: now she can share it with the entire country in October! For now, here is a brief summary to whet your appetite. - Heidi Sandstrom

The University of California, San Diego Biomedical Library (UCSD BML) was able to reduce its "unfilled" DOCLINE lending request rate from 39% to 23% by identifying and correcting errors in its SERHOLD records. This was accomplished by completing an analysis of "unfilled" **journal article** lending requests, because these constituted the majority of the library's "unfilled" lending requests. Results of the analysis revealed that their SERHOLD records had inadvertently not been modified to reflect recent journal cancellations at BML.

Additional analysis was done following the corrections to the SERHOLD records, in order to determine other causes for the remaining "unfilled" requests. A variety of causes were found: 46% of the rejected lending requests resulted from causes nearly impossible to avoid (e.g.

item was at the bindery, item was not yet received, rejected for cost) and 54% of the rejected lending requests resulted because the library either did not own the title or lacked the particular volume/issue being requested. Various examples were given as to why this latter situation might occur.

In her concluding remarks, Barbara mentioned actions that can be taken to improve ILL efficiency:

1. Update your SERHOLD records
2. Encourage/train staff to let the DOCLINE routing work (do not routinely prefix)
3. Coordinate pulling with reshelving of items
4. Do not circulate your serials collection
5. Minimize bindery time
6. Encourage NLM to route DOCLINE requests based on a cost algorithm ★

Barbara Slater Honored

Barbara Slater, a reference librarian at the Biomedical Library at the University of California, San Diego, was presented with the Louise Darling MLGSCA Achievement Award at the Spring Meeting on April 30 in Long Beach. She is the tenth recipient of this award and joins an impressive group of past recipients who have made significant contributions to health sciences librarianship and to MLGSCA.

Barbara's involvement in MLGSCA began in 1989, when she became a member of the Joint Meeting Planning Committee. She subsequently became a member of the Membership Committee, Newsletter Editor, Treasurer, Chair of the ILL Committee, and President-Elect. She became President in 1995-96 and was Past-President this year. She has served with energy and graciousness. Congratulations, Barbara, on an honor well-deserved! ★

Credit for Learning the Newest Grateful Med's

The National Library of Medicine has received approval from the National Institutes of Health to offer CME credit for the latest versions of Grateful Med: Internet Grateful Med and Windows Grateful Med. With this approval all versions of Grateful Med can be offered from basic to advanced levels for continuing education credit. Health professionals can earn one credit for a basic class and up to three credits for a basic-to-advanced workshop. The library offering the course must be a network member. It is acceptable to charge participants for attendance.

A CME/CEU packet is available from PSRML. This packet includes class agendas, participant sign-in sheet, evaluation form, summary form, a sample certificate, and instructions describing what is expected of a trainer. To receive CME/CEU credits, participants must complete and return a course evaluation to the trainer. If you would like to offer continuing education for Grateful Med workshops under this program, please contact PSRML for the CME/CEU packet. ★

Outreach Project Awards

by *Claire Hamasu*

PSRML is pleased to announce that the first awardees have been selected for the Region 7 Outreach Projects. Oroville Hospital Rural Outreach Project and Pinal County, Arizona Information Infrastructure Development will each receive \$3,500 to improve information access at healthcare facilities that do not have medical libraries by establishing a consortium of participating institutions.

The Oroville Hospital Rural Outreach Project "focuses on equipping participants with the necessary background knowledge and specific hands-on skills needed to make effective use of the National Library of Medicine's family of databases and of Internet resources." Participating in this project are the following institutions: California Correctional Center, Chico Community Hospital, Chico

Community Rehabilitation Hospital, Colusa Community Hospital, Enloe Hospital, Feather River Hospital, Lassen Community Hospital, and Plumas District Hospital.

The Pinal County, AZ Information Infrastructure Development will "strengthen the existing relationship of the Pinal County Collaborative Network Working Group by developing Grateful Med capabilities in the Pinal Gila Behavioral Health Association, the Sun Life Family Health Center, and the San Manuel Health Care Center. The project will allow 100 health providers access to recent, health information-something they currently do not have."

Congratulations to Patricia Auflick of the University of Arizona Rural Health Office and Roger Brudno of Oroville Hospital's Goddard Memorial Library, the principal investigators! ★

Web-Based Consumer Health Database Now Available

CAPHIS, the **Consumer and Patient Health Information Section** of the Medical Library Association, now has a searchable database on the Web of library consumer health information programs! The database, which contains 62 libraries, has two audiences. **Consumers** or librarians can search by subject, state, textword, or can retrieve a list of all libraries in the database. In addition, **librarians** can search for comparative management data involving budget, staff, collection, space and Web involvement. The URL is: http://www.njc.org/caphis/find_intro.html

The CAPHIS Web site also contains very useful information on how to set up and run a Consumer Health Library, including a bibliography of resources concerning patient and consumer health information libraries and library management. ★

New Toll-Free Number for National Library of Medicine Customers

The first phase of NLM's customer service initiative has been completed: a new toll-free number and simplified phone tree are available. NLM is now providing customers with one number to call, 1-888-FINDNLM (1-888-346-3656). International callers may dial 301-594-5983 to reach NLM. The phone tree has been streamlined to 4 menu choices:

1. Calls relating to NLM's databases and accessing of databases;
2. Reference calls relating to NLM's collection;

3. Calls relating to DOCLINE and interlibrary loan;
4. Calls relating to NLM itself, hours, and tours.

Calls are being answered by a variety of NLM librarians and technical information specialists from MEDLARS Management and the Reference Section.

Previously NLM had several different 800 numbers (toll-free) for customers to use depending upon which area of the library the customer needed to reach. The old 800 numbers will be

phased out over the next months and are already mapped to the new simplified automatic call distribution system.

Any comments regarding the new toll-free system should be forwarded to Pamela Meredith, Head of Reference Section pam_meredith@ccmail.nlm.nih.gov (301)496-6097 Fax (301)402-1387 or Carolyn Tilley, Head of Medlars Management Section, carolyn_tilley@ccmail.nlm.nih.gov (301)402-4076 Fax (301)496-0822 ★

Fundamentals of MEDLARS Searching

The *Fundamentals of MEDLARS Searching* Class will be held in Region 7 on October 30-31, 1997. The two day class is FREE and concentrates on command language searching. There is a cut-off date, October 6, 1997, for registering for the *Fundamentals* class to allow participants to receive site information in a timely manner.

To register complete the electronic Request for NLM Online Training form (<http://www.nlm.nih.gov/mar/online/request.html>) or request a form from the Online Training Center. Confirmation will be sent within a week of registering for the class. If you are interested in attending, and it is close to the closing date, please call the National Online Training Center. The minimum enrollment for all classes is 15 confirmed registrants. If the minimum enrollment is not met by the closing date, the class will be canceled.

The only prerequisite for the FREE *Fundamentals* class is a user ID and password. Call the National Online Training Center for the registration form for a code.

For questions or more information contact Charles Rapisarda at the National Online Training Center 1-800-338-7657 and press 2 at the prompt or email crapisarda@health.nyam.org.

PSRML has two videotapes used during the *Fundamentals* class: **Getting Started...a MEDLARS overview**, and **Getting Started...the MeSH Vocabulary**. Both tapes are available for loan by contacting PSRML. ★

New Gateway Web Site Launched

by Heidi Sandstrom

On April 15, 1997, as many of us were scrambling to give to the government in the form of taxes, the U.S. government gave something back. **healthfinder** (TM), a new government gateway site on the Internet, was launched by Secretary of Health and Human Services Donna E. Shalala at the opening session of the Partnerships For Networked Consumer Health Information '97 Conference in Washington, D.C. The site was created in response to a request by Vice President Gore to improve consumers' access to federal health information online. It is a "gateway" to information resources from the federal government, state and local agencies, not for profit organizations, universities, and other consumer health resources.

"With healthfinder, we're helping people get reliable health information, faster and easier, over the Internet," Shalala said. "We're covering a wide range of information, and we're providing information that people can trust."

healthfinder was developed by the Office of Disease Prevention and Health Promotion (ODPHP) of HHS, in collaboration with many other agencies. Its Internet address is:

<http://www.healthfinder.gov>

This Web site received 4.8 million hits in its first 30 days of operation. For more information about the site, including the federal agencies represented, selection guidelines, technical aspects and general information, click on the "about" icon at the site.

(Information for this article was obtained from the *healthfinder* Web site and a press release) ★

Fundamentals of MEDLARS		Register By
July 14-15, 1997	Gainesville, FL	Jun 20
July 30-31, 1997	Chicago, IL	Jul 3
August 4-5, 1997	Portland, OR	July 3
August 14-15, 1997	New York, NY	Jul 25
August 25-26, 1997	Farmington, CT	Aug 8
September 9-10, 1997	Omaha, NE	Aug 15
September 15-16, 1997	Bethesda, MD	Aug 29
September 22-23, 1997	Minneapolis, MN	Aug 31
September 25-26, 1997	Baltimore, MD	Aug 31
October 20-21, 1997	Bethesda, MD	Oct 3
October 30-31, 1997	Los Angeles, CA	Oct 6
November 6-7, 1997	New York, NY	Oct 24
November 13-14, 1997	Houston, TX	Oct 17
November 18-19, 1997	Chicago, IL	Oct 17
December 4-5, 1997	Farmington, CT	Nov 21
December 11-12, 1997	Chapel Hill, NC	Nov 13
December 16-17, 1997	Seattle, WA	Nov 13

Highlights from the NLM UPDATE at the Medical Library Association Annual Meeting in Seattle

by Jules Darren

"We think that our prime responsibility is to do whatever we can to get the most high quality information to the user, to the public, and to the healthcare professional. The medical librarian's role in that is absolutely critical. No way could we have achieved what the country has achieved were it not for the help of the medical librarians in all of the institutions plus the [Medical Library] Association, and that's critical." - Donald A. Lindberg, M.D., Director, National Library of Medicine

This statement marks just one of the themes brought out at the NLM Update at MLA. The Update was divided into three parts: announcements from Dr. Lindberg; a demonstration of PubMed by Dr. David J. Lipman, Acting Chief, Computational Biology Branch; and Library Operations news from Lois Ann Colaianne, Associate Director of Library Operations. Another theme was the expansion of NLM's programs and services to include health care consumers and patients.

The following are highlights of information presented Monday May 26, 1997.

Library Operations: The appropriations for Library Operations increased this fiscal year. Older computers and software are being replaced. NLM is doing its best to respond to the speed of change, and reduce the FTE consonant with President Clinton's promise to reduce the number of government employees. The number of staff working at NLM has been reduced by 65 in the last 2-3 years.

High Performance Computing and Communications (HPCC): HPCC money is being used for grants to institutions, hospitals, libraries, and schools. After five

years, there is now a presidentially appointed HPCC advisory committee with members who understand the promise of librarianship and medical informatics (among the advisory committee members is Sherrilynne Fuller, Director of the Pacific Northwest Region's RML).

Public Health Initiative: NLM and the NN/LM are working collaboratively with Centers for Disease Control and Prevention (CDC), the National Association of County and City Health Officials (NACCHO) and the Association of State and Territorial Health Officials (ASTHO) to improve public health professionals access to information technology and information services. After an initial orientation meeting at NLM in January, a Steering Committee, consisting of representatives from each of these groups, was appointed to direct the joint program. The Steering Committee held its first meeting in May to set the focus for the first year of the program. The Regional Medical Libraries are involved in identifying network members that provide training for public health personnel who are interested in doing more with information. Outreach projects will result.

If you have programs that involve public health personnel or are interested in collaborating on such a program, please notify your RML.

Consumer Health: NLM has developed a working group that will formulate procedures for consideration of certain consumer health journals and newsletters for inclusion in MEDLINE. Titles to be considered will be evaluated by outside reviewers, including MLA's Section on Consumer and Patient Health Information.

Informatics: Informatics grants and training opportunities are available for health science librarians. NLM is encouraging librarians to participate in these training programs and take advantage of these opportunities. Contact PSRML for more information.

Feedback: NLM is interested in receiving feedback from you – both positive and negative – on the services you find useful. They often get suggestions about things that don't work, but in fixing them may undo other things which in fact work really well. Please try to provide feedback about the good things and the things you wish would be changed. There is a new toll-free customer service for your feedback: 888-FINDNLM. ☛

MLA '97 SERHOLD Meeting

by Heidi Sandstrom

This annual meeting, sponsored by NLM, was held at the Sheraton Seattle Hotel on May 26, 1997, in conjunction with MLA '97. Topics covered included:

- Annual Statistical Overview
- Online SERHOLD Updating System
- Batch Updating Program and 1997 Update Schedule
- FTP Submission of Batch Updates
- OCLC MARC Conversion Program
- SERLINE Location Codes
- Useful SERHOLD URLs
- Union List Products

You might find the following items of interest:

Annual Statistical Overview

Three hundred and eighty six libraries in our Region currently participate in SERHOLD; this number has remained fairly constant since 1991, the earliest year data was reported at this meeting. However, the number of holdings statements has increased from 137,719 to 153,248 in the years since 1991. The number of serials titles has increased from 18,616 to 21,941 over this same time period. About 5% of our holdings statements in Region 7 are in Level X* format, below the national rate of 7%.

Online SERHOLD Updating System

Neither the DOCLINE service desk nor the MEDLARS Management Service Desk is able to answer SERHOLD questions. If you are experiencing difficulties or have questions regarding the Online SERHOLD Updating System, call your Area SERHOLD

Coordinator first, then call the Network Coordinator at PSRML if you need additional assistance.

NLM has begun to assign ONLINE SERHOLD codes to consortia instead of to an individual library within the consortia. For example, a group of libraries in West Los Angeles might access the Online System via the code WLA instead of by the code of one library within that group.

The revised Online SERHOLD Updating System Procedures Manual (March 1997 Edition) is available via the Internet at: <http://www.nlm.nih.gov/tsd/serials/proman02.html>

SERLINE Location Codes

The location codes of over 165 resource and other major libraries have appeared in SERLINE for over 15 years, predating the DOCLINE system. These codes were updated annually from the holdings information in the SERHOLD database, but no indication of whether or not a library currently acquired a particular title was ever indicated in SERLINE. Due to system changes, NLM is no longer able to update the location information in SERLINE. The holdings information is current in SERHOLD and DOCLINE, but the data in SERLINE were last updated in 1995. Since the location data are outdated, have limited usefulness due to lack of specific holdings and acquisition status, and are not needed for DOCLINE routing, NLM may be removing the location codes from SERLINE.

Union List Products

NLM will produce microfiche, print and tape products for an

entire region or for existing large, cross-regional consortia for which NLM has produced products in the past. NLM will provide a master in each of the formats. Requests for union list products may be submitted at any time throughout the year, but NLM will produce each union list product only once each calendar year.

The **RML in Region 6 (PNRML)** now provides individualized SERHOLD services. Due to increasing interest in the production of individual and state SERHOLD products in a variety of formats, including ftp and disk output, NLM has entered into a cooperative agreement with the Pacific Northwest Regional Medical Library (PNRML) in Seattle to provide customized SERHOLD products. PNRML is able to provide individualized SERHOLD lists, state lists, and other SERHOLD union list products for a small fee based on computer tapes of SERHOLD data prepared by NLM. Requests for these products will be coordinated through the Regional Medical Library in each region.

You may want to visit PNRML's **SERHOLD Products** Website at:

<http://www.nlm.nih.gov/pnr/serhold/products.html>

Special thanks to those in Region 7 who attended the meeting! Please call the PSRML Network Coordinator if you have additional questions or comments regarding SERHOLD and/or union list products. ★

* A method of reporting holdings to SERHOLD in symbols not read by DOCLINE when routing ILL requests.

Casting the Net Internet Search Engines and Sifting Through All of the Junk

by Jules Darren

There is so much junk on the Internet. I can't find what I need on the Internet.

Does this sound familiar? These are a sample of complaints that net trainers hear from students in their classes. To some degree, the concerns are justified. There is a lot of *junk* and seemingly useless information on the Internet.

There is also a great deal of good information on the Internet. In fact, some of the best developed and richest resources are on biomedical and health related topics. Searching, finding or sifting through all of the *junk* out there is a skill that librarians, as information professionals, have. How we find information on the Internet does not differ from how we find information contained in a library catalog or database. An Internet search engine indexes data for retrieval, but unlike MEDLINE, these engines do not generally use MeSH terms or controlled vocabulary. The lack of controlled vocabulary or metadata (e.g. data that describes the data; markup tags similar to MARC tags) standards with each search engine can be an obstacle to finding what you are looking for. The key is to get to know the search engine (or database) that we are using.

Rest assured, sophisticated search engines are being developed by government agencies (see NCBI/NLM's PubMed <http://www4.ncbi.nlm.nih.gov/PubMed/>), academic institutions, and university digital library projects (see <http://dli.grainger.uiuc.edu/>

[national.htm](#)).

Reading the Frequently Asked Questions (FAQ's) available at most search engine Web sites will prove helpful in deciding which one will be most useful for you. From the FAQ, as well as the help screens, you will learn:

- How new Web sites (documents) are added to the collection (submitted by author?)
- How the engine retrieves and ranks data (occurrence of the search terms within the full-text or first few lines of text of the document, the URL, title, or HTML heading tags)
- How often it re-indexes Web sites
- Whether or not proximity, field searching, truncation, modifying a search, phrase searching, Boolean or Boolean-like operators are allowed
- Whether or not there are stop words
- What advanced search techniques (if any) the engine supports

In addition to the bulleted points above, you should keep in mind the following information on how search engines function when deciding which search engine is best for you.

Manual and Automated Indexing

Search engines index data by two methods: manual and automated. Manual indexing is

done by a human being who decides which directory or category (e.g. subject heading) to assign to the document. Although in the traditional sense, Yahoo (<http://www.yahoo.com>) is a directory rather than a search engine, it is an example of a search tool for manually indexed documents. At Yahoo this indexing is done by librarians.

Automated indexing is done by machine (e.g. robot, spider, crawler) and is based on the structural features (HTML tags designating titles, body, headings etc.) of the document being indexed. AltaVista (<http://www.digital.altavista.com/>), Lycos (<http://www.lycos.com>), and WebCrawler (<http://webcrawler.com>) are examples of automated indexing.

What Gets Indexed

Some search engines index the title, first few lines of text or keywords assigned by the author, while others automatically index the full text of a Web document. You can learn how and what a search engine indexes by reading the FAQ provided on the homepage of the search engine.

Qualities of THE Best Search Engine

To be truthful, there isn't *one* best search engine. When you compare the different features of a search engine, you may find that you will rely on more than one engine for your Internet searching. You might find that you prefer using a meta search

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(Casting the Net, continued from page11)

engine. A meta search engine searches several search engines at one time. MetaCrawler (<http://webcrawler.com>) is an example of a meta search engine that searches nine different search engines at once.

To test a search engine's effectiveness, run the same search using different search engines. To make it easy to compare your search results, open more than one browser (in the menu bar click on "File" and select "Open New Browser") and re-size the browsers by dragging a corner of the browser window up/down so that all of the browsers you have opened fit on your monitor screen. Then try searching for the names of major corporations and institutions (e.g., National Library of Medicine). Notice whether or not the top 25 hits retrieved are devoted to your topic. To test a search engine's currency, run a search on something timely (e.g., cloning, PubMed, etc...). If you are using a search engine that indexes the full text of documents (and these advanced features are supported by that engine), you might want to use proximity operators rather than Boolean operators to ensure your terms are located near each other.

To learn more about search engines including the conflict of interest between information seekers and Website designers, sign up for PSRML's *Critical Analysis of Search Engines* class (see page 16 for class schedule). ★

Medically Oriented Search Engines

Reprinted with permission from NN/LM SEA Currents vol. 5 no. 4, Compiled by Bryan Vogh, Internet Coordinator, National Network of Libraries of Medicine, Southeastern Atlantic Region (NN/LM SE/A).



Health on the Net (HON)

<http://www.hon.ch/>

HON is an international effort to maximize the use of the Internet's health care resources. MedHunt searches HON's database and lists the first 10 reviewed sites and 10 unreviewed sites in the initial results. The reviews include the date that the site was visited, where the site is located, the language(s) it is available in, if the site is commercial or non-profit and the keywords that the site was given by the indexer. The keywords that are listed are also links that perform a search using that term if selected. Watch out if you only want reviewed sites! If the database does not contain any reviews it automatically gives you the unreviewed sites.



HealthAtoZ

<http://Healthatoz.com/>

HealthAtoZ includes reviews, a judgement of the level of the site (professional or consumer or both), and 27 top level categories to choose from. It offers the option to search only reviewed sites. The reviews are based on a five star rating system and are only one or two sentences long. The site claims to have been "exclusively catalogued by medical professionals who have a greater understanding and strong

background in health and medicine." The news section is updated with a new feature article every two weeks and covers a wide range of topics.



Achoo

<http://www.achoo.com/index1.htm>

The main directory contains four categories: Human Life, Practice of Medicine, Business of Health, and What's New. It allows a simple key word search of the whole database as well as a search limited to a section. The references include a one or two sentence description of the site. This site is a collection of links to many other sites that collect links on various topics. There is no review mechanism and no recommendation/rating system. The site says that it employs a medical librarian, but I could not find a name or contact information.



MedSurf

<http://www.medsurf.com/>

This site does not list its "editors" or give you any indication of their qualifications. It contains three main categories: General Information, Practitioner's Information, and Researcher's Information. The list of sites repeats most of the information that can be found in the other directories/resources listed here. The limited number of entries and the lack of reviews make this site of limited use. ★

NLM Grants for Libraries: An Overview

Reprinted with permission from the National Network of Libraries of Medicine, Greater Midwest Region (GMR), 3 Sources, February 1997

Have you considered applying for an NLM grant, but didn't know where to start, or which grant would be appropriate for your needs? Trying to find funding for a project or idea to improve your library's services can be time-consuming and frustrating. To simplify the process, this article offers a brief description of the NLM grants offered to libraries to improve their basic resources and services.

The Grants

Resource Grants*

NLM offers resource grants to encourage the use of telecommunications technologies to further the dissemination of health sciences information. There are two types of grants available, depending on your institution's size and needs.

Information Access Grants

Who: Typically, libraries at small-to-medium sized community hospitals.

What: These projects should link health professionals and relevant information resources, including access to NLM online databases and/or a mechanism for providing documents. If the application promotes end-user searching of the databases, then the appropriate training should be included.

How Much: Single institutions — up to \$12,000 for one year of support. Consortia/contractual arrangements — up to \$12,000 for one year for each participating

institution. The responsible organization can request an additional \$12,000 for initial year planning/organizing support.

Information System Grants

Who: Typically, academic health science institutions and larger hospitals with teaching and research components.

What: Like the access grant, this grant is intended to facilitate the use of health science information; it differs in the scope and the nature of the technology used. It may encompass whole systems, establish connectivity between system components, or improve infrastructure. The grant must be used for an operational activity, rather than for research purposes. Provisions for online access to NLM databases and document delivery are encouraged.

How much: From \$50,000 to \$150,000 per year, for a one- to three-year period.

IAIMS Grants**

Who: U.S. public or private, non-profit hospitals and medical centers, academic health science centers, and other health science organizations and institutions.

What: Integrated Advanced Information Management Systems (IAIMS) are institution-wide computer networks that link and relate library systems with individual and institutional databases and information files, within and external to the institution, for patient care, research, education,

and administration. The goal is to create an organizational mechanism within health institutions to manage more effectively the knowledge of medicine, and to provide for a system of comprehensive and convenient information access. Particular emphasis is placed on providing easy "one-stop information shopping" for the user.

How much: IAIMS projects typically involve two phases: 1) a planning phase of one to two years (up to \$150,000 per year) and 2) an operational phase (up to \$500,000 per year).

Internet Connection for Medical Institutions Grant***

Who: Domestic, public and private, non-profit institutions engaged in health sciences administration, education, research, and/or clinical care are eligible to apply.

What: To encourage the development of a communications infrastructure to foster the rapid communication of medical information throughout the healthcare community, the National Library of Medicine offers these grants to support institution-wide Internet connections.

How much: For a single institution, support is available up to \$30,000; a group of institutions may receive up to \$50,000 to support development of a multi-institution network including extending existing connectivity to outlying sites, or

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HII '97: The Second Annual Emerging Health Information Infrastructure Conference & Partnerships '97: The Third Annual Partnerships for Networked Consumer Health Information Conference

by Heidi Sandstrom

HII '97, a conference which examines key policy issues on the implementation of an information infrastructure that supports healthcare applications, was held in conjunction with Partnerships '97, which explored developments in the field of consumer health informatics (CHI) and laid a foundation for critical assessments of CHI applications. Both conferences were held in mid-April at Georgetown University in Washington, DC, and joint sessions, which focused on developments in consumer

health information and telecommunications and their impact on health and health care, were held on Tuesday, April 15. These joint sessions featured remarks by Donna Shalala, Secretary of Health and Human Services; and by Al Gore, Vice President of the United States. Speakers Reed Tuckson, MD; Molly Joel Coye, MD, MPH; and the Honorable Reed Hundt, Chairman of the Federal Communications Commission, discussed such topics as reaching the underserved via the Internet; redefining roles of health professionals, consumers

and patients; and implications of the 1996 Telecommunications Act.

Detailed information about these conferences, including agendas, speakers' biographies, session summaries and transcripts, background documents, and other items are available on the Internet at the following two sites:

[http://
odphp.osophs.dhhs.gov/
confrnce/partnr97/](http://odphp.osophs.dhhs.gov/confrnce/partnr97/)
www.fnlm.org/

Surf's up...so catch this wave on health information! ★

(NLM Grants Overview, continued from page13)

otherwise furthering NLM's goal of expanding information outreach.

**Adapted in part from Resource Grant Programs, NLM Fact Sheet*

*** Excerpted in part from IAIMS Grants, Integrated Advanced Information Management System, NLM Fact Sheet*

****Excerpted in part from Internet Connection for Medical Institutions. NIH Guide, Volume 26, Number 1, January 10, 1997. PA NUMBER: PAR-97-023.*

The Application

Each of the above grants should be submitted to NLM on the grant application form PHS 398 before the standard deadline dates of February 1, June 1, and October 1. You can obtain forms from your RML, or directly from: Division of Extramural Outreach and Information Resources National Institutes of Health

6701 Rockledge Drive, MSC 7910
Bethesda, MD 20892-7910;
301/435-0714;

asknih@odrockm1.od.nih.gov

Applications and instructions are available on the Web at:

[http://www.nih.gov/grants/
phs398/phs398.html](http://www.nih.gov/grants/phs398/phs398.html)

Special instructions for Resource Grants are available on the Web at:

[http://www.nlm.nih.gov/
about_nlm/organization/
extramural/special_inst.html](http://www.nlm.nih.gov/about_nlm/organization/extramural/special_inst.html)

Sources of Further Information

For more information on the application process, check out the NLM Web site: <http://www.nlm.nih.gov> or ask your RML.

The NLM Web site features RFPs, application materials, and fact sheets that describe the various NLM grant programs (including the review criteria). You can find lists of previous grant awards and rosters of the BLRC and the Board of Regents. In addition, the following articles have been reprinted and formatted for the Web:

Bowden, VM. National Library of Medicine Resource Grants: Application and Review. *Bulletin of the Medical Library Association* 1992;80(2):157-168.

Zink S, Illes J, Vannier M. NLM Extramural Program: Frequently Asked Questions 1996;84(2):165-81. ★

NLM SCORING SYSTEM

by Roger W. Dahlen, Ph.D., Scientific Review Administrator, Extramural Programs, National Library of Medicine

The National Institutes of Health (NIH), uses a unique and not intuitively obvious method to score and/or rank the grant applications it receives. This system has been in place for a number of years. Though this article specifically describes the Resource Grant Program, the review of all NIH grant applications follows essentially the same path.

All grant applications are received at a central NIH receipt office where they are logged, assigned a serial number, and duplicated. Those assigned to NLM are sent to NLM's Extramural Programs (in the case of Resource Grant applications that means Frances Johnson, program officer, and myself) The applications are screened to verify that they meet the Resource Grant criteria, and then sent to the Biomedical Library Review Committee (BLRC). This committee is responsible for making recommendations to NLM regarding the merit of the applications.

The BLRC meets three times a year, usually in March, June, and November. When an application is sent to the committee, it is assigned to three members. These three members critique the application based on the review criteria published in the Request for Proposal (RFP) and lead the committee discussion of the application. Following the

discussion, each committee member assigns what is known as a priority score.

If you will recall your student days when you took an exam, it would come back with either a letter or number grade. The priority score is similar in concept. NIH uses a numeric score. The score assigned by each member must fall within the range of 1.0 to 5.0 with 1.0 being the best score. After the meeting, the individual scores are summed, and an arithmetic average is multiplied by 100. Therefore, the priority score (grade) on an application ranges between 100 and 500 and, like in golf, a low number is a better score. The priority score is probably the single most important factor NLM uses to determine which applications will be funded.

The competition for grant support is extremely intense. An application with a priority score higher than 200 probably will not be awarded. The BLRC spends most of its time and discussion on those applications considered to be in the upper half of the group. Therefore, some applications with a priority score higher than about 250 will receive little or no additional committee discussion. Some applications with a priority score lower than 250 which are not awarded are held over to later award cycles, and may be awarded at that time.

After the BLRC meeting, a

summary statement is prepared and sent to the applicant. This document contains the written comments and critiques of the assigned reviewers, a summary of the committee discussion, and the priority score. After reading the score and critique of your proposal, you are encouraged to contact the program officer, Frances Johnson, to discuss whether an award is likely and whether a revised application is advisable. When preparing a revision, take into account all the critiques and the summary statement.

Approximately two months after the BLRC meeting, the Board of Regents of the National Library of Medicine meets and makes recommendations regarding NLM's grant programs. The Board does not discuss the merit of individual applications, but instead provides overall program guidance, such as the amount of funds devoted to each grant program (Access, Systems, Internet Connections, IAIMS, etc.) and how the applications fits into each program.

Finally, senior NLM staff determine which applications receive an award, taking into account the recommendations of the BLRC and the Board of Regents. ★

PSRML Internet Class Schedule

In the RML Training Lab

Friday, August 8th:

10:00-12:00 p.m.
1:00-3:00 p.m.

Breaking Through the Net
Critical Analysis of Search Engines & Understanding the Conflict of Interest on the Net

Saturday, August 9th:

10:00-12:00 p.m.
1:00-3:00 p.m.

Search Engines
Netscape Tips & Tricks: An Internet Skill-Building Class

Friday, September 12th:

10:00-12:00 p.m.
1:00-3:00 p.m.

Breaking Through the Net
Critical Analysis of Search Engines & Understanding the Conflict of Interest on the Net

Off-Site Classes

Friday, July 18th

1:00-3:00 p.m.

At Loma Linda

Critical Analysis of Search Engines
Understanding the Conflict of Interest on the Net

August 1997

At San Jose (tentative)

Critical Analysis of Search Engines &
Understanding the Conflict of Interest on the Net

The July Internet classes have been canceled while PSRML is being painted.

For a description of the PSRML Internet Classes, please see *Latitudes* v6n3 or visit the PSRML publications website at <http://www.nlm.nih.gov/psr/pubs.html>.

Please call PSRML to sign up for Internet classes or to schedule a class in your area.

Upcoming Events

August 1997

9 Resource Sharing Class
SERHOLD - 9:00-10:30 a.m.
DOCLINE - 11:00 - 1:00 p.m.
Los Angeles, CA

September 1997

13 Resource Sharing Class
SERHOLD - 9:00-10:30 a.m.
DOCLINE - 11:00 - 1:00 p.m.
Los Angeles, CA

October 1997

1 NLM Resource Grants
Deadline
30-31 *Fundamental of MEDLARS*
Searching Class
Los Angeles, CA

University of California, Los Angeles
PSRML/Louise M. Darling Biomedical Library
12-077 Center for the Health Sciences
Box 951798
Los Angeles, CA 90095-1798
BK35

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